## <u>Indiana State Police Methamphetamine Laboratory Occurrence Report</u> This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>03-29-2010</u>	Address:	3120 N Washington Lot 19
Case #:	<u>16F19620</u>		<u>Kokomo, IN 46901</u>
County:	Howard		
Type of La	aboratory Seizure (check one)	Seizure Location (check all that apply)	
<ul><li>☑ Operational Lab</li><li>☐ Chemical/Glassware/Equipment (only)</li><li>☐ Dumpsite (only)</li></ul>		<ul><li>☐ Residence</li><li>☐ Outbuilding</li><li>☐ Vehicle</li></ul>	<ul><li>☐ Hotel/Motel</li><li>☐ Open – No Structure</li><li>☐ Other:</li></ul>
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply)    Lithium/Ammonia Reaction(s): outbuilding			
Red Phosphorous/Iodine Reaction(s): N/A			
Flammable Solvents: front left porch			
Anhydrous Ammonia: N/A			
Hydrochloric Acid Gas Generator(s): <u>trash</u>			
Corrosive Acid: <u>trash</u>			
Corrosive Base: trash / outbuilding			
Other (item and location): N/A			
☐ Yes N ☑ No	er age 18 discovered (check one)  A (number present)  eport to Child Protective Services	Ephedrin Retail/M	<u>e Information</u> e/Pseudoephedrine Tracking Log erchant Tip okomo PD investigation
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	tment: Kokomo Fd	Fax: <u>(765)456-7580</u>	
Health Department: Howard Co.		Fax: <u>(765)</u> Fax: N/A	<u>456-2292</u>
Child Prote	ection Service: N/A		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Joshua Maller</u> Phone (765) 473-6666			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.